

06 14 03

3826 \$

Please type a plus sign (+) inside this box → 

PTO/SB/21 (6-98)  
Approved for use through 09/30/2000, OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/851,634
Filing Date	May 8, 2001
First Named Inventor	Alan R. Reinberg
Group Art Unit	2826
Examiner Name	A. Williams

Attorney Docket Number MI22-1704

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Remarks		Customer No. 021567
<small>The Commissioner is hereby authorized to charge any additional fees required under 37 C.F.R. § 1.16 and § 1.17 and credit any overpayments to account no. 23-0925.</small>		

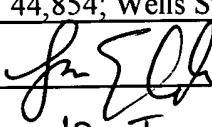
RECEIVED

TECH CENTER 2800

JUN 19 2003

Return Postcard:  
A check for \$72.00

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	James E. Lake Reg. No. 44,854; Wells St. John P.S.
Signature	
Date	12 Jun 2003

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name	
Signature	Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

EV317135861



PTO/SB/17 (12/99)

Approved for use through 09/30/2000, OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$72.00)

Complete if Known	
Application Number	09/851,634
Filing Date	May 8, 2001
First Named Inventor	Alan R. Reinberg
Examiner Name	A. Williams
Group / Art Unit	2826
Attorney Docket No.	MI22-1704

## METHOD OF PAYMENT (check one)

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **23-0925**

Deposit Account Name **Wells St. John P.S.**

Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17

2.  Payment Enclosed:

Check  Money Order  Other

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101	690	201 345 Utility filing fee	<b>0.00</b>
106	310	206 155 Design filing fee	
107	480	207 240 Plant filing fee	
108	690	208 345 Reissue filing fee	
114	150	214 75 Provisional filing fee	

SUBTOTAL (1) (\$ 0.00)

## 2. EXTRA CLAIM FEES

Extra Claims	Fee from below	Fee Paid
Total Claims <b>24</b>	<b>-20** = 4</b>	<b>X 18 = 72</b>
Independent Claims <b>3</b>	<b>-3** = 0</b>	<b>X 84 = 0</b>
MultipleDependent		<b>= 0</b>

\*or number previously paid, if greater. For Reissues, see below

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103	18	203 9 Claims in excess of 20
102	78	202 39 Independent claims in excess of 3
104	260	204 130 Multiple dependent claim, if not paid
109	78	209 39 ** Reissue independent claims over original patent
110	18	210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 72.00)

## 3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65 Surcharge - late filing fee or oath	<b>0.00</b>
127	50	227 25 Surcharge - late provisional filing fee or cover sheet	<b>0.00</b>
139	130	139 130 Non-English specification	<b>0.00</b>
147	2,520	147 2,520 For filing a request for reexamination	<b>0.00</b>
112	920*	112 920* Requesting publication of SIR prior to Examiner action	<b>0.00</b>
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	<b>0.00</b>
115	110	215 55 Extension for reply within first month	<b>0.00</b>
116	380	216 190 Extension for reply within second month	<b>0.00</b>
117	870	217 435 Extension for reply within third month	<b>0.00</b>
118	1,360	218 680 Extension for reply within fourth month	<b>0.00</b>
128	1,850	228 925 Extension for reply within fifth month	<b>0.00</b>
119	300	219 150 Notice of Appeal	<b>0.00</b>
120	300	220 150 Filing a brief in support of an appeal	<b>0.00</b>
121	260	221 130 Request for oral hearing	<b>0.00</b>
138	1,510	138 1,510 Petition to institute a public use proceeding	<b>0.00</b>
140	110	240 55 Petition to revive - unavoidable	<b>0.00</b>
141	1,210	241 605 Petition to revive - unintentional	<b>0.00</b>
142	1,210	242 605 Utility issue fee (or reissue)	<b>0.00</b>
143	430	243 215 Design issue fee	<b>0.00</b>
144	580	244 290 Plant issue fee	<b>0.00</b>
122	130	122 130 Petitions to the Commissioner	<b>0.00</b>
123	50	123 50 Petitions related to provisional applications	<b>0.00</b>
126	240	126 240 Submission of Information Disclosure Stmt	<b>0.00</b>
581	40	581 40 Recording each patent assignment per property (times number of properties)	<b>0.00</b>
146	690	246 345 Filing a submission after final rejection (37 CFR § 1.129(a))	<b>0.00</b>
149	690	249 345 For each additional invention to be examined (37 CFR § 1.129(b))	<b>0.00</b>
Other fee (specify) _____			<b>0.00</b>
Other fee (specify) _____			<b>0.00</b>

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0.00)

TECHNOLOGY CENTER 2800

## SUBMITTED BY

Name (Print/Type)	James E. Lake	Registration No. (Attorney/Agent)	44,854	Telephone	US-509-624-4276
Signature	<i>James E. Lake</i>			Date	12 Jun 2003

## WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

EV317135861